

Goddard Space Flight Center

Request for Ionizing Radiation Safety Committee Action

Ionizing Radiation Producing Device Questionnaire



1. Originator's Name (Last, First, M.I.):	Code	Phone	Date	Docket Number
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2. Device Data and Description:

a. Device Type:

b. Manufacturer and Address:

c. Model Number:

d. Operating Parameters: Maximum - kVp; mA Normal - kVp; mA

Average Weekly "on" time - minutes

e. Target Materials:

f. Description of Use:

3. Detailed Description: (attach installation plans, diagrams, applicable manufacturer information, etc.)

Number of pages attached: (Include Certifications if applicable)

Radiation Protection Office (RPO) Use Only

4. Date Received:	5. GSFC Number:	6. Category of Source:	7. Serial Number:
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8. Survey Frequency:	Annual	Biennial	Triennial
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9. Notes:

10. RPO Certification:

Printed Name:	Signature:	Date:
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Final Disposition:

Person Authorizing Disposition:

Instructions for filling out GSFC Form 23-28I [DEVICE], Request for Ionizing Radiation Safety Committee Action - Ionizing Radiation Producing Device Questionnaire

For additional guidance refer to GPR 1860.1 (series) "Ionizing Radiation Protection," particularly paragraph 2.4

ALL ITEMS MUST BE ELECTRONICALLY TYPED ONTO THE FORM

1. If you do not have a GSFC Code designation you must include a valid mailing address on an attached paper.
2. Source Data:
 - a. Device type;
 - b. Manufacturer and address of manufacturer (include telephone number if known);
 - c. Model number;
 - d. List the operating parameters;
 - Maximum kVp and mA that the device is capable of
 - Normal kVp and mA that the device will be routinely operated
 - Average weekly use in minutes
 - e. Types of target materials built into the system or which will be targeted by the device.
 - f. Give a brief description of the proposed use.
3. Provide a detailed description of the installation, include a diagram and specific dimensions. Provide any manufacturer information that will be useful in reviewing the device and its installation. Include a copy of State safety certifications if applicable.

RETURN THE ELECTRONICALLY COMPLETED FORM VIA EMAIL TO CODE 350.2

If you have any questions concerning this form or need to know who to send the form electronically to, then please contact the Radiation Protection Office (RPO) at 301-286-0280.

RADIATION PROTECTION OFFICE (RPO) USE ONLY

4. Indicates the date source was originally surveyed by the RPO.
5. Indicates the GSFC identification number assigned by the RPO.
6. Indicates the source Type classification determined by the RPO (GPR 1860.1 (series), section 1.5).
7. Indicates the manufacturers serial number (if any).
8. Survey requirements determined by the RPO.
9. RPO notes.
10. Certifying RPO person.

Final disposition will be certified by persons authorized by the Ionizing Radiation Safety Committee only.